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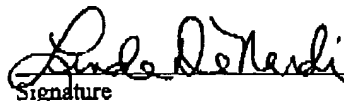
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TO: Commissioner for Patents
FAX NO.: 571-273-8300
FROM: Kin-Wah Tong
DATE: June 23, 2006
MATTER: Serial No. 10/063,867 Filed: May 21, 2002
DOCKET NO.: ATT/2001-0281
APPLICANT: GREENBERG, et al

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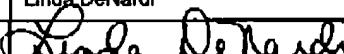
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/063,867	RECEIVED CENTRAL FAX CENTER JUN 23 2006
	Filing Date	May 21, 2002	
	First Named Inventor	GREENBERG, et al	
	Group Art Unit	2616	
	Examiner Name	A. T. Chou	
Total Number of Pages in This Submission		Attorney Docket Number	ATT/2001-0281

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address, Authorization to Act in a Representative Capacity <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission
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